MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/561,432

FILING DATE 12/19/05

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1					51						
2				1				52						
3				1				53						
4				1				54						
5				1				55						
6				1				56						
7				1				57						
8				1				58						
9				1				59						
10				1				60						
11				1				61						
12				1				62						
13				1				63						
14				1				64						
15				1				65						
16				1				66						
17				1				67						
18				1				68						
19				1				69						
20				1				70						
21				1				71						
22				1				72						
23				1				73						
24			1					74						
25				1				75						
26			1					76						
27				1				77						
28								78						
29								79						
30								80						
31								81						
32								82						
33								83						
34								84						
35								85						
36								86						
37								87						
38								88						
39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.			3					TOTAL IND.						
TOTAL DEP.			24					TOTAL DEP.						
TOTAL CLAIMS			27					TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)